

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO. 10-609-195 FILING DATE 06-26-05  
APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		5				
7	1					
8	1					
9	1					
10	1					
11	1					
12	(1)					
13	1					
14	1					
15	(1)					
16	(1)					
17	(1)					
18	(1)					
19	(1)					
20	(1)					
21	(1)					
22	(1)					
23	(1)					
24	(1)					
25	(1)					
26	(1)					
27	(1)					
28	(1)					
29	(1)					
30	(1)					
31	(1)					
32	(1)					
33	(1)					
34	(1)					
35	(1)					
36	(1)					
37	(1)					
38	(1)					
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	7					
TOTAL DEP.	35					
TOTAL CLAIMS	42					

	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61						
62						
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97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						